PART B - FEE(S) TRANSMITTAL

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

WASHINGTON OFFICE

CUSTOMER NUMBER

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037

WASHING	GTON, DC 20031		1 TRADELLE							
APPLICATION NO. FILING DATE FII		RST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.				
10/654,182 09/03/2003		3/2003	Thierry LUCIDARME		Q103139		5176			
TITLE OF INVENTIO THE IMPLEMENTAT		LLOCATING RESOU HOD	RCES IN A SPA	CE DIVISION	RADIOCOMMUNIO	CATION SYSTEM	1 AND EQUIP	MENT FOR		
APPLN. TYPE	PPLN. TYPE SMALL ENTITY		PUBLICAT FEE	ION PREV	. PAID ISSUE FEE	TOTAL FEE(DUE	S) D) DATE DUE		
nonprovisional	NO	\$1440.00	\$300.00)	\$0.00	\$1,740.00	0	8/30/2008		
EXAMINER			ART UNI	IT CLA	SS-SUBCLASS					
PAT	2611	375-316000								
1. Change of correspon	dence address or indi	cation of "Fee Address"	(37 CFR 1.363	2. For printin	g on the patent front p	page list 1	Sughrue Mic	on, PLLC		
☐ Change of correspondence address (or Change of Correspondence Address f PTO/SB/122) attached.				ress form (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2						
☑ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Re 03-02 or more recent) ATTACHED. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME	AND RESIDENCE	DATA TO BE PRINTE	D ON THE PAT		ype)					
PLEASE NOTE: Unler recordation as set forth	ss an assignee is ide in 37 CFR 3.11. Con	ntified below, no assign npletion of this form is	ee data will appe NOT a substitute	ear on the paten e for filing an as	t. If an assignee is id signment.	entified below, the	document has	been filed for		
(A) NAME OF ASSIG	A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Alcatel Lucent	Paris, Fra	nce								
Please check the approp	oriate assignee categ	ory or categories (will n	ot be printed on t	the patent): 🗆 Is	ndividual ☑ Corporat	ion or other privat	e group entity l	☐ Government		
4a. The following fee(s) are submitted:			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
☑ Issue Fee			☐ A check is enclosed.							
☑ Publication Fee (No small entity discount permitted)			☐ Payment by credit card. Form 1310-2038 is attached.							
☐ Advance Order - # of Copies			☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any							

overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form). ☑ The USPTO is directed and authorized to charge all required fees to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account. 5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature /Kelly G. Hyndman 39,234/ Date August 26, 2008 Typed or Printed Name Kelly G. Hyndman Registration No. 08/27/2008 AWONDAF2 00000013 194880 10654182

PART B - FEE(S) TRANSMITTAL

FIRST NAMED INVENTOR

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

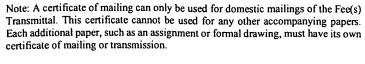
FILING DATE

washington office 23373

CUSTOMER NUMBER

APPLICATION NO.

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037



Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

CONFIRMATION NO.

ATTORNEY DOCKET NO.

10/654,182	10/654,182 09/03/2003		Thierry LUCIDARME		Q1031	5176					
TITLE OF INVENTION THE IMPLEMENTAT			RCES IN A SPA	CE DIV	ISION RADIOCOMMUNIC	ATION SYSTEM AND	EQUIPMENT FOR				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICAT FEE	PUBLICATION PREV. PAID ISSUE FIFE		TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1440.00	\$300.00	•	\$0.00	\$1,740.00 08/30/2008					
	ART UNIT		CLASS-SUBCLASS								
PAT	2611		375-316000								
1. Change of correspon	dence address or ind	lication of "Fee Address"	(37 CFR 1.363	2. For	printing on the patent front pa	ige list 1 Sugh	nrue Mion, PLLC				
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2											
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.											
3. ASSIGNEE NAME	AND RESIDENCE	DATA TO BE PRINTE	D ON THE PAT	ENT (p	rint or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
Alcatel Lucent	Paris, Fra	ince									
Please check the appro	priate assignee categ	gory or categories (will n	ot be printed on t	he pate	nt): □ Individual ☑ Corporatio	on or other private group	entity Government				
4a. The following fee(s	4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
☑ Issue Fee				☐ A check is enclosed.							
☑ Publication Fee (No		nt permitted)	•	☐ Payment by credit card. Form 1310-2038 is attached.							
☐ Advance Order - # o	overpayme	☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).									
☑ The USPTO is directed and authorized to charge all required fees to Deposit Account. ☐ The USPTO is directed and authorized to charge all required fees to Deposit Account.							Deposit Account No.				
5. Change in Entity Sta	•	•									
		tatus. See 37 CFR 1.27.			no longer claiming SMALL El						
					r to re-apply any previously pa						
		(if required) will not be a the United States Patent			her than the applicant; a regist	ered attorney or agent; o	or the assignee or other				
Authorized Signature	_	/Kelly G. Hyndman 39,2	234/	Date		August 26, 2008					
Typed or Printed Name	•	Kelly G. Hyndman		Regis	tration No.	39,234					
Modified PTOL-85 (Re	ev. 08/07) Approved	for use through 08/31/2	010.								